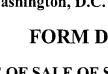
FORM D

1170624

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



DATE RECEIVED

	Iment and name has changed, and indicate change.) DRATION SERIES B PREFERRED STOCK	
Filing Under (Check box(es) that apply): ☐ Ru Type of Filing: ☑ New Filing ☐ An	ale 504 🔲 Rule 505 🔀 Rule 506 🔲 Section 4(6) mendment	bkocesses
	A. BASIC IDENTIFICATION DATA	JUL 3 1 2003
1. Enter the information requested about the iss	suer	THOMSOM
Name of Issuer (☐ check if this is an amendment NETWORK INTELLIGENCE CORPORA	ent and name has changed, and indicate change.) TION	FINANCIAL
Address of Executive Offices 55 WEST STREET, WALPOLE, MA 0208	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) (508) 668-2460
Address of Principal Business Operations (if different from Executive Offices) N/A	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) N/A
Brief Description of Business DEVELOPMENT AND DISTRIBUTION O	OF COMPUTER SOFTWARE	
Type of Business Organization	_	
☐ corporation ☐ business trust	☐ limited partnership, already formed☐ limited partnership, to be formed☐	other (please specify):
Actual or Estimated Date of Incorporation or O	rganization: $\begin{array}{c cccc} & & & & & & & & & & \\ \hline Month & & & & & & & \\ \hline 0 & 1 & & & & & & \\ \hline & 0 & 2 & & & \\ \hline \end{array}$	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation for State:	
	CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

1972 (7/00)

	·		TIFICATION DATA		
2. Enter the information re	-	-			
 Each beneficial ow the issuer; 	ner having the powe	•	t the vote or disposition of, 10		
	cer and director of con nanaging partner of p		rate general and managing pa	rtners of partnership is	suers; and
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if MORMANN, LYNN A.	individual)				
Business or Residence Addre NETWORK INTELLIGEN			WALPOLE, MA 02081		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if MCDERMOTT, PAUL K.	findividual)				
Business or Residence Addre NETWORK INTELLIGEN			WALPOLE, MA 02081		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if STEVENS, MATTHEW	`individual)				_
Business or Residence Addre NETWORK INTELLIGEN			WALPOLE, MA 02081		.
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if OBLAK, GEOFFREY S.	individual)				
Business or Residence Addre ASCENT VENTURE MAN	ss (Number and Stre NAGEMENT INC.,	et, City, State, Zip Code) 255 STATE STREET, 5 ^{TI}	H FLOOR, BOSTON, MA 0	2109	
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if SHANAHAN, MICHAEL)					
Business or Residence Addre EGAN MANAGED CAPIT			, MA 02110		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if WOLOSON, BRADFORD					
Business or Residence Addre JMI EQUITY, 1119 ST. PA					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	, , ,	•.			В.	INFORMA	ATION ABO	UT OFFER	ING				
1.	Has the	issuer sold,	or does the	issuer inten	d to sell, to	non-accredi	ted investors	in this offeri	ng?	Yes No			
					Answer al	so in Appen	dix, Column	2, if filing u	nder ULOE.				
2.	What is	the minimu	m investme	ent that will	be accepted	from any ir	ndividual?						
3.	Does th	e offering pe	ermit joint o	ownership o	f a single ur	nit?		·	• • • • • • • • • • • • • • • • • • • •	Yes No □	X		
4.	similar to be lis list the r	remuneration ted is an asso name of the l	on for sol ociated per oroker or	icitation of rson or age	purchaser ent of a l more than	s in conne broker or on the (5)	ection with dealer regist persons to	sales of se ered with th	directly or in curities in the se SEC and a associated	he offering or with a	state or	person states,	
Full N/A		ast name fir	st, if indivi	dual)				·					
Bus	siness or F	Residence Ad	ddress (Nur	nber and Sti	reet, City, S	tate, Zip Co	de)						
Nar	ne of Ass	ociated Brol	cer or Deale	:r ·									
Stat	tes in Whi	ch Person L	isted Has S	olicited or I	ntends to So	olicit Purcha	isers	-	_				
				dividual Sta								🔲 All Si	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Ful	l Name (L	ast name fir	st, if indivi	dual)							•		
Bus	siness or F	Residence Ad	idress (Nur	nber and Sti	reet, City, S	tate, Zip Co	de)						
Nar	ne of Ass	ociated Brok	cer or Deale	er	· · · · · · · · · · · · · · · · · · ·				***************************************				
Sta	tes in Wh	ch Person L	isted Has S	olicited or I	ntends to So	olicit Purcha	isers						
					•							🔲 All S	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Ful	l Name (L	ast name fir	st, if indivi	dual)					_				
Bus	siness or I	Residence A	ddress (Nur	mber and Sti	reet, City, S	tate, Zip Co	de)		7				
Nai	me of Ass	ociated Brol	cer or Deale	er							•		
Sta	tes in Wh	ich Person L	isted Has S	Solicited or I	ntends to S	olicit Purcha	isers						
				dividual Sta			[(************************************					. 🔲 All Sta	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD] .	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Alread Sold
	Debt	\$0	\$0
	Equity	\$5,000,000	\$4,697,000
	☐ Common 🔀 Preferred		,
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$5,000,000	\$4,697,000
	Answer also in Appendix, Column 3, if filing under ULOE.	44 ,000,000	\$ 1,057,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$4,697,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)	4	\$4,697,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amoun Sold
	Rule 505	NONE	\$0
	Regulation A	NONE	\$0
	Rule 504	EQUITY	\$4,697,000
	Total		\$4,697,000
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	X	\$60,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	_ ⊠	\$60,000
	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	_	\$4,637,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

roceeds to th	x e	
	Payments to Officers, Directors, & Affiliates	Payments to Others
	\$	\$
	\$	□ \$
	\$	□ \$
	\$	□ \$
	\$	□ \$
	\$	\$
	\$4,697,000	\$
	\$	□ \$
	\$\$ \$4,697,000 \$4,69	□ \$ □ \$ 7,000
Repayment of indebtedness \$		
irities and aragraph (b)(Exchange Commiss (2) of Rule 502.	
	7/24/5002	,
	<u> </u>	
minal vic	lations (See 19	HIS C 1001 \
	person. If urities and aragraph (b)(Officers, Directors, & Affiliates \$

•									
E. STATE SIGNATURE									
	230.262 presently subject to any of the disqualification								
	See Appendix, Column 5, for state	e response.							
2. The undersigned issuer hereby un (17 CFR 239.500) at such times a	dertakes to furnish to any state administrator of any st s required by state law.	tate in which this notice is filed, a notice on Form D							
3. The undersigned issuer hereby un	dertakes to furnish to the state administrators, upon w	ritten request, information furnished by the issuer to offerees.							
Offering Exemption (ULOE) of the	that the issuer is familiar with the conditions that mus he state in which this notice is filed and understands the these conditions have been satisfied.	st be satisfied to be entitled to the Uniform limited nat the issuer claiming the availability of this exemption							
The issuer has read this notification as undersigned duly authorized person.	nd knows the contents to be true and has duly caused	this notice to be signed on its behalf by the							
Issuer (Print or Type) NETWORK INTELLIGENCE CORPORATION	Signature Samu G. Morange	Date 7/29/2013							
Name of Signer (Print or Type) LYNN A. MORMANN	Title (Print or Type) PRESIDENT								

Instruction: Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-a investor	2 d to sell accredited as in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	·	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR			·							
CA										
СО										
CT										
DE										
DC										
FL										
GA			•		_					
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME								1		
MD		X	Preferred Stock, \$1,350,000	1	\$1,047,000					
MA		X	Preferred Stock, \$3,650,000	3	\$3,650,000					
MI			N 1: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
MN										
MS										

APPENDIX

	r			AFFENDI							
1	Intend to non-a investor	I to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
МО											
MT											
NE											
NV											
NH											
NJ											
NM											
NY											
NC						- "					
ND											
ОН											
OK											
OR											
PA			-								
RI											
SC							_				
SD											
TN									<u> </u>		
TX											
UT											
VT											
VA											
WA		<u> </u>									
WV											
WI			- Continue to the Continue to								
WY											

APPENDIX

1	to non-a investor	2 I to sell accredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
PR										